

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

**TELEPHONE: (303) 740-1980**

INTELLECTUAL PROPERTY LAW  
12400 WILSHIRE BOULEVARD, 7TH FLOOR  
LOS ANGELES, CA 90025

FACSIMILE: (303) 740-6962

RECEIVED  
CENTRAL FAX CENTER

NOV 22 2006

# FACSIMILE COVER SHEET

Deliver to: Dai Phuong, USPTO Art Group: 2688  
Facsimile No.: (571) 273-8300 Date: November 22, 2006  
From: Ashley R. Ott, Reg. No. 55,515  
Our Docket No.: 15685P023DC Number of pages 23 including this sheet.  
Application No.: 10/692,671 Filing Date: 10/24/2003  
Docket Due Date(s): 11/24/2006

Enclosed are the following documents:

- ☒ Amendment: Response ( 19 pgs)

☐ Appeal Brief (      pgs)

☐ Application: \_\_\_\_\_  
(      pgs) w/cover & abstract)

☐ Assignment & Cover Sheet (      pgs)

☒ Certificate of Facsimile \_\_\_\_\_

☐ Continued Prosecution Application (CPA)

☐ Declaration & POA (      pgs)

☐ Drawings:      sheets,      figures

☐ Extension of Time: \_\_\_\_\_

☒ Fee Transmittal (in duplicate)

☐ IDS & PTO/SB/08 (      pgs)

☐ Other \_\_\_\_\_

☐ Issue Fee Transmittal

☐ Notice of Appeal

☐ Petition for: \_\_\_\_\_

☐ Request for Continued Examination (RCE)

☐ Reply Brief (      pgs)

☐ Request & Certification Under 35 USC 122(b)(2)(B)(i)

☐ Request to Rescind Previous Nonpublication Request

☐ Response to Notice of Missing Parts & Formalities Letter

☐ Response to Written Opinion (      pgs)

☐ Terminal Disclaimer

☐ Transmittal of Publication Fee Due

☒ Transmittal Letter

**CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8A)**

I hereby certify that this correspondence is being transmitted by facsimile on the date shown below to the United States Patent and Trademark Office.

Pat Sullivan 11/22/2006  
Pat Sullivan Date

**Confidentiality Note:** The documents accompanying this facsimile transmission contain information from the law firm of Blakely, Sokoloff, Taylor & Zafman which is confidential or privileged. The information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the retrieval of the original documents at no cost to you.

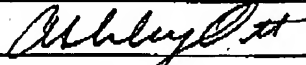
**If you do not receive all the pages, or if there is any difficulty in receiving, please call: (303) 740-1980 and ask for Pat Sullivan.**


RECEIVED  
CENTRAL FAX CENTER

NOV 22 2006

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application No.	10/692,671
		Filing Date	October 24, 2003
		First Named Inventor	Tibor Boros
		Art Unit	2688
		Examiner Name	Dai Phuong
Total Number of Pages in This Submission	23	Attorney Docket Number	15685P023DC

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Facsimile Transmittal Sheet</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Ashley R. Ott, Reg. No. 55,515 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	November 22, 2006

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Pat Sullivan	Date	November 22, 2006
Signature		Date	November 22, 2006

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (mde) 10/12/2006.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

RECEIVED  
CENTRAL FAX CENTER

NOV 22 2006

**FEE TRANSMITTAL  
for FY 2005**

Patent fees are subject to annual revision.

**Complete if Known**☐ Applicant claims small entity status. See 37 CFR 1.27.**TOTAL AMOUNT OF PAYMENT** (\$) 0.00

Application Number	10/692,671
Filing Date	October 24, 2003
First Named Inventor	Tibor Boros
Examiner Name	Dai Phuong
Art Unit	2688
Attorney Docket No.	15685P023DC

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☒ Credit any overpayments

**FEE CALCULATION****1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
66	66*	0	\$0.00
8	8*	0	\$0.00
Multiple Dependent			
Large Entity	Small Entity		
Fee Code	Fee Code	Fee Description	
1202 50	2202 25	Claims in excess of 20	
1201 200	2201 100	Independent claims in excess of 3	
1203 360	2203 180	Multiple Dependent claims, if not paid	
1204 780	2204 390	**Reissue independent claims over original patent	
1205 300	2205 150	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (1)		(\$)	0.00

\*or number previously paid, if greater. For Reissues, see below

**2. ADDITIONAL FEES.**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code		
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
2053 130	2053 130	Non-English specification	
1251 120	2251 60	Extension for reply within first month	
1252 450	2252 225	Extension for reply within second month	
1253 1,020	2253 510	Extension for reply within third month	
1254 1,590	2254 795	Extension for reply within fourth month	
1255 2,160	2255 1,080	Extension for reply within fifth month	
1401 500	2401 250	Notice of Appeal	
1402 500	2402 250	Filing a brief in support of an appeal	
1403 1,000	2403 500	Request for oral hearing	
1451 1,510	2451 1,510	Petition to institute a public use proceeding	
1460 130	2460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(g)	
1808 180	1808 180	Submission of Information Disclosure Sheet	
1809 790	1809 395	Filing a submission after final rejection (37 CFR § 1.129(b))	
1810 790	2810 395	For each additional invention to be examined (37 CFR § 1.128(b))	
Other fee (specify)			
SUBTOTAL (2)		(\$)	

**SUBMITTED BY**

Name (Print/Type)	Ashley R. Ott	Registration No. (Attorney/Agent)	55,515	Telephone	(303) 740-1980
Signature		Date	11/22/06		

Complete (if applicable)

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wrt) 12/15/2004.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

RECEIVED  
CENTRAL FAX CENTER

NOV 22 2006

Our Docket No: 15685P023DC

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Boros

Examiner: Dai Phuong

Application No.: 10/692,671

Art Group: 2617

Filed: 10/24/2003

For: DETERMINING A SPATIAL  
SIGNATURE USING A ROBUST  
CALIBRATION SIGNALAMENDMENTCommissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed 08/24/2006, applicant respectfully requests the Examiner to enter the following amendments and to consider the following remarks.

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that I am causing the above-referenced correspondence to be transmitted via facsimile to the United States Patent and Trademark Office at (571) 273-8300 on the date indicated below:

November 22, 2006

Date of Transmission

Pat Sullivan

Name of Person Transmitting Correspondence

Signature



11/22/2006

Date

Atty Docket No. 15685P023DC  
Application No. 10/692,671

1